

**OUT-OF-STATE TRAVEL
APPROVAL REQUEST FORM
CD-2700 (09/01)**

**Note: Advance approval by the CDD required for this expenditure.
Cost incurred prior to the date authorization may not be
claimed as a reimbursable expense.**

Submit your request to:
California Department of Education
Child Development Division
1430 N Street, Suite 6308
Sacramento, CA 95814

SECTION 1 - CONTRACTOR DATA

CONTRACTOR	ADDRESS	CITY	ZIP CODE
TRAVELLER'S NAME		TELEPHONE	CONTRACT TYPE

SECTION 2 - TRAVEL INFORMATION

EVENT AND DESTINATION	TRAVEL DATE (S)	PURPOSE	COSTS
	Begin:		\$
	End:		

SECTION 3 - CERTIFICATION

I certify that we have a board approved, written travel policy available for review by the California Department of Education. Maximum rates for out-of-state travel comply with State Board of Control regulations. The nature of this out-of-state travel is directly associated with the child development contract; and the benefits to be derived by the contractor through out-of-state travel are not available within the state. I also certify that the above information is true and correct.	BOARD PRESIDENT OR DESIGNEE SIGNATURE	TITLE	DATE
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FOR CDD USE.

Check one. Approved <input type="checkbox"/> Disapprove <input type="checkbox"/>	Approved amount \$	Comments
Consultant signature Date:	Administrator signature Date:	

CDD distribution: Original to contractor. Copies to Child Development Audits, Consultant, and contractor file.